## P09000068732

(Requestor's Name)				
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Office Use Only



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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Yellow Cab of Cen	tral Florida Inc	
DOCUMENT NUME			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	Daniel D McCarthy Jr		
		Name of Contact Person	n
	Yellow Cab of Central Florid	a	
		Firm/ Company	
	121 W Hermosa St		
		Address	
	Lady Lake, Fl 32159		
		City/ State and Zip Cod	е
mcda	njr@gmail.com		
		sed for future annual report	notification)
For further information  Daniel D McCarthy Ja	n concerning this matter, pleas		<b>.</b> 504-9971
Name of Contact Person		at ( Area Co	) 504-9971 de & Daytime Telephone Number
	r the following amount made		
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio Cliftor 2661 E	Address Iment Section on of Corporations a Building Executive Center Circle assee, FL 32301

## Articles of Amendment to Articles of Incorporation of

and you be expended by

Yellow Cab of Central Florida Inc

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(Name of Corporation	on as currently filed with the Florida Dept, of State)
P09000068732	
(Docum	nent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the co	rporation:
name must he distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the c	The new d'"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADD</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<b>Y</b> )
If amending the registered agent and/or registered new registered agent and/or the new registered of the	
Name of New Registered Agent	
<del></del>	
	(Florida street address)
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Region in the second state of the appointment as registered agent. I	stered Agent: I am familiar with and accept the obligations of the position.
Siana	iture of New Registered Agent if changing

## If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doe		
X Remove	<u>v</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
1) X Change	PD	Daniel D McCarthy, Jr	121 W Hermosa St	
Add			Lady Lake, Fl 32159	
Remove				
2) X Change	VD	William B McCarthy	701 Alameda Ave	
Add			Nolensville, TN 37135	
Remove				
3) x Change	TSD	Daniel D McCarthy, Sr	121 W Hermosa St	
Add			Lady Lake, Fl 32159	
Remove				
4) X Change	D	Thomas J Fehr, Rev	3452 Craig Ave	
Add			Cincinnati, OH 45211	
Remove				
<b>.</b>				
5) Change	<del></del>			
Add				
Remove				
6) Change				
Add				
Remove				

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)			
		····		
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			· · · · · · · · · · · · · · · · · · ·	
an amendment provides for an exchorovisions for implementing the amer	inge, reclassification, or c dment if not contained in	ancellation of issued the amendment itse	<u>shares.</u> lf:	
(if not applicable, indicate N/A)				
		<u> </u>		
			<del></del>	
				<del></del>

The date of each amendment(s) adoption: date this document was signed.	, if other than the
· ·	
Effective date if applicable:  (no more than 90 days after amen	dment file date)
Note: If the date inserted in this block does not meet the applicable statutory filidocument's effective date on the Department of State's records.	ing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes by the shareholders was/were sufficient for approval.	cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups must be separately provided for each voting group entitled to vote separately on	s. The following statement the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for ap	proval
by	,"
☐ The amendment(s) was/were adopted by the board of directors without sharehold action was not required.	ler action and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action was not required.    Dated   March 1, 2017	r officers have not been
(Typed or printed name of person sig	gning)
President/Director	
(Title of person signing)	